	_		
RECORDING REQUESTED BY			
WHEN RECORDED MAIL TO:			
NAME			
MAILING ADDRESS (Street number and name)			
0777			
CITY STATE ZIP CODE			
		N THE SPACE ABOVE space above for exclusive use	
NOTICE OF INTENDED TRANSFER OF	RETAIL ALCOH	OLIC BEVERAGE L	ICENSE UNDER
SECTIONS 24073 AND 24074 CALIFO			IS CODE
	istructions before	completing.	
1. LICENSEE(S) NAME(S) (Seller)			
2. PREMISES ADDRESS TO WHICH LICENSE(S) HAS/HAVE BEEN ISSUE	ED .		
3. LICENSEE'S MAILING ADDRESS (If different)			
4. APPLICANT(S) NAME (Transferee or Buyer)			
5. PROPOSED BUSINESS ADDRESS (If different than Item 2)			
6. MAILING ADDRESS OF APPLICANT			
0. WAILING ADDRESS OF AFFLICANT			
7. KIND OF LICENSE INTENDED TO BE TRANSFERRED			
8. ESCROW HOLDER/GUARANTOR NAME			
9. ESCROW HOLDER/GUARANTOR ADDRESS			
5. ESONOW HOLDEN GOARANTON ADDINESS			
10.TOTAL CONSIDERATION TO BE PAID FOR THE BUSINESS AND LICE	ENSE; INCLUDING INVENTORY	, WHETHER ACTUAL COST, ESTIMA	TED COST, OR A NOT-TO-EXCEED AMOUNT
CASH		\$	
CHECKS			
PROMISSORY NOTES			
TANGIBLE AND/OR INTANG	IBLE PROPERTY		
		\$	
The parties agree that the consideration for the tra of Alcoholic Beverage Control has approved the pre escrow holder to make payment or distribution with	oposed transfer. The nin a resonable time af	parties also agree and her ter the completion of the tr	ein direct the above-named
provided in Section 24074 of the California Busines LICENSEE'S SIGNATURE (Transferor or Seller)	ss and Protessions Co	de.	DATE SIGNED
APPLICANT'S SIGNATURE (Transferee or Buyer)			DATE SIGNED

One copy of this notice, <u>CERTIFIED</u> by the County Recorder, together with an additional copy must accompany the application for the transfer of the license.

ABC-227 (8/99)

State of California, Department of Alcoholic Beverage Control